

ISSUE SLIP STAPLE AREA (for additional cross references)

9/0

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEES DETERMINATION | SML | | 10/9/00 |
| O.I.P.E. CLASSIFIER | | | 10/10/00 |
| FORMALITY REVIEW | SM | 879 | 11-02-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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| Final | Original |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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